Bioethics and global health: a necessary dialogue

Paulo Antonio de Carvalho Fortes ¹, Regina Ribeiro Parizi Carvalho ², Glaucia Rita Tittanegro ³, Livia Maria Pedalini ⁴, Daniele Pompei Sacardo ⁵

Abstract

This article is a theoretical reflection on establishing bridges for a dialogue between bioethics and global health. It involves the study and practice of health issues that go beyond national borders, imposing the necessity of global action and agreements for their resolution. It refers to the transnational impacts of globalization over social determinants and health issues that are beyond the control of countries. Since Potter, bioethics discusses the necessity of caring for the planet, relating life condition of humans to the environment. Thus, bioethics may be a suitable instrument to discuss this diversity of global health issues from the principles of justice, equity and solidarity, aiming at reducing injustice and promoting a global community accountable for current and future generations.

Key words: Bioethics. Global health. World health. Equity.

Resumo

Bioética e saúde global: um diálogo necessário

O artigo é uma reflexão teórica sobre o estabelecimento de pontes para o diálogo entre a bioética e a saúde global. Esta envolve o estudo e a prática de temas de saúde que extrapolam as fronteiras nacionais, impondo a necessidade de ação e acordos globais para sua resolução. Refere-se aos impactos transnacionais da globalização sobre os determinantes sociais e problemas de saúde que estão além do controle dos países. Desde Potter, a bioética discute a necessidade do cuidar do planeta, relacionando as condições de vida dos seres humanos ao meio ambiente. Assim, a bioética pode ser adequado instrumento para discutir essa diversidade de problemas de saúde global a partir dos princípios de justiça, equidade e solidariedade, visando reduzir injustiças e promover uma comunidade global responsável com as gerações atuais e futuras.

Palavras-chave: Bioética. Saúde global. Saúde mundial. Equidade.

Resumen

Bioética y salud global: un diálogo necesario

El artículo es una reflexión teórica sobre el establecimiento de puentes para el diálogo entre la bioética y la salud global. Esta abarca el estudio y la práctica de temas de salud que ultrapasan las fronteras nacionales, imponiendo la necesidad de acción y acuerdos globales para su resolución. Se refiere a los impactos transnacionales de la globalización sobre los determinantes sociales y problemas de salud que van más allá del control de los países. Desde Potter la bioética discute la necesidad de cuidar el planeta, relacionando a las condiciones de vida de los seres humanos y del medio ambiente. De esa forma, la bioética puede ser un adecuado instrumento para discutir esa diversidad de problemas de salud global a partir de los principios de la justicia, equidad y solidaridad, objetivando reducir in justicias y promover una comunidad global responsable con las generaciones actuales y futuras.

Palabras-clave: Bioética. Salud global. Salud mundial. Equidad.

1. Full Professor pacfusp@usp.br — University of Sao Paulo (USP) Public Health College 2. Doctorate pariziregina@gmail.com — University of Brasilia (UnB) 3. Dr. glauciackanegr @uol.com.br — Pontifical Gregorian University/Rome/Italy 4. Dr. guiligui@usp.br - University of Sao Paulo (USP) Public Health College 5. Dr. danipsac@usp.br - University of Sao Paulo (USP) Public Health College, Sao Paulo, Brazil.

Correspondence

Paulo Antonio de Carvalho Fortes - Avenida Dr. Arnaldo, 715 Faculdade de Saúde Pública da Universidade de Sao Paulo CEP 01246-904. Sao Paulo/SP, Brazil.

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The paper aims to establish an initial dialogue between two fields of knowledge - global health and bioethics - rather than to deepen specific areas related to both topics, such as the human rights field, which is limited in this reflection to the UNESCO *Universal Declaration on Bioethics and Human Rights*, as this would give rise to an argument with greater depth, which would encompass other instruments and perspectives of dialogue. The same occurs with the phenomenon of globalization, presented in a few paragraphs only to contextualize the current historical moment of the debate on global health, not deepening the interfaces with the economic, health, social and environmental fields.

The intention is to present a contemporary approach, pointing out current discussions on the concept of international and global health, their different approaches and health needs. Therefore, it is not based on the World Health Organization (WHO) and other public and private international organizations working with global health, which because of their importance deserve specific attention in other scientific papers. It should be emphasized that the purpose of this presentation is to establish and encourage the initiation of the dialogue between global health and bioethics, highlighting the importance of the latter as an instrument of reflection for the first, without advocating the supremacy of any current bioethics as most suitable solution for its analysis.

Mundialization and global health

The concern for international health, a term coined in 1913 by the Rockefeller Foundation in the United States of America (USA), is not new in human history. However, it was in the 20th century that international health assumes full force, especially after the two world wars, seeking to answer the threats hovering over humanity after the conflicts .

In the 1990s, this concept or field of knowledge began to be questioned and since then the concept of *global health* is being developed, having WHO as one of its leading proponents. Still without consensus in the international literature, the field of knowledge of global health is extremely important, because it comes from the realization that many health issues go beyond territorial boundaries, being essentially global. Its resolution requires intervention and agreements between diverse social actors, including and countries and governments as well as international agencies and public and private institutions.

Recent and major facts, such as the influenza A (H1N1) pandemic, the natural disasters in Indonesia, Japan, Haiti and Chile, global climate change, the threat of bioterrorism and food contamination cases in European countries caused by the bacterium *Escherichia coli* bacteria show that health has occupied a strategic place on the international relations agenda. All these facts indicate the need to expand cooperation between countries, aiming to address the complex issues of this nature.

Global health also involves core issues that affect various dimensions of human life: access to health care and essential medicines, food and water of good quality, environmental improvement, elimination of marginalization and social exclusion, reducing poverty and illiteracy - as pointed out by the *Universal Declaration on Bioethics and Human Rights* 2.

The concept seeks also to understand more frequent health problems in the world with the internationalization of health events and the transformations of systems and public health policies, particularly in their international effects. It is worth noting that health has been considered a driving force for economic growth and not just resulting of it, as previously proclaimed ³.

Global health issues are complex, and their complexity requires, firstly, the distinction of the various stakeholders and their many interests. Discerning the actors requires us to particularize the actions. As stated by Aristotle ⁴ in his Nicomachean Ethics: we must examine to the nature of actions, how we ought to perform them, for they determine the nature of the states of character that are produced.

Under such consideration, it can be stated that this field of knowledge is eminently ethical, by seeking to reflect on health issues in a complex world, elucidating them, searching for ways to mediate conflicts, seeking agreements. We find considerations on it in, for example, authors such as Smith, Tang, Nutbeam, Kickbusch and Berger, who ponder about the challenges to global health.

Actions related to global health contribute to many ethical problems not dissimilar to those that already are the local concerns, but expanded in space and time: how to decide which lives are to be saved in certain situations such as natural disasters? Must we seek to fulfill the needs of populations with higher risk factors or act in the entirety of populations? Where, when and to whom to allocate scarce resources? Which risks can be accepted in the interventions? What moral values should be preserved? How to reconcile the

interests of individuals, groups and society? How to reconcile different moral positions between different collaborators? When defining the field of action, its importance is understood as global health refers to trans-boundary impacts of globalization on social determinants and health problems that are beyond the individual countries' control

The globalization processes, in this 21st century, are related to the increasing incorporation of technology, the expansion of media, climate and environmental change, the increasing migration of people in search of better conditions of life and work, fleeing political persecution or natural disasters. Recent literature deals with the economic globalization coupled with political, cultural, technological, informational and communicative globalization. This whole process results in new opportunities and challenges, and the benefits and adverse impacts involving all dimensions of human relations should be analyzed.

Santos states that when talking about globalization, there is talk, actually, about the dominant characteristics of the subject. Assuming that there is no consensus on its definition, much less about its effects and impacts, he indicates that it constitutes a field of conflict between different social groups, countries, and subaltern and hegemonic interests. Still, he highlights, the hegemonic field acts on the basis of a consensus among the most influential members. This consensus not only gives globalization its dominant characteristics, but also legitimizes the latter as the only ones possible or the only ones appropriate 9. This consensus to which the author refers is the

. This consensus to which the author refers is the familiar *neoliberal consensus* or *Washington consensus*, which redefined during the 1980s the role of the States in the economy - which affected all dimensions of globalization.

Kawashi and Wamala summarize globalization as a process that reduces the cost of distance and Alarcos understands it as the reduction of space and time, with the disappearance of borders, linking people's everyday lives to events that occur in other parts of the planet, constituting itself into today's new paradigm, which has required increased attention from the international agenda. There are also authors, in the literature of the 1990s, who distinguish the phenomena of globalization and mundialization. Take Dreifuss as example

(...) mundialization deals with attitudes, habits and patterns, with styles of behavior, manners and customs and lifestyles, by creating common denominators in the consumption preferences of the most diverse natures. Mundialization involves the generalization and standardization of products, tools, information and resources at the disposal of major portions of the world population (...)

Such generalization and standardization was already pointed out by him, then, as a result of ever-increasing movements among people, for the aforementioned reasons. Seeking therefore to define the concept of globalization, the author states that under the name of 'globalization' we find several different sets of phenomena and processes belonging to the 'scope' of the economy (research, funding, production, management, marketing) that unfold in society, are expressed in culture and determine politics, conditioning management and national governance 14

The Dreifuss distinction 12, even subtle, has considerable implications for the health theme. Global health will in fact deal with this tension between economics and politics. In other words. its field reflects the resistance of mentalities and ways of living to the standards and/or agreements, pacts, modes set by the negotiations in the international public policy agencies. It can be said, finally, that the tension between mundialization and globalization is the guiding principle that promotes discussion on the social health determinants, because in order to mediate agreements, to propose interventions or the possibility of dialogue at the negotiating table one must face the challenge of thinking the questions on the threshold between economics and politics.

The phenomena of mundialization and globalization occur with planetary interdependence and intradependence processes that have as consequences: 1) the reduction of power and transformation of the role of nation states; 2) deregulation of markets; 3) the emergence of political-economic blocs for regional integration; 4) renewing the role of Public international organizations, like WHO, 5) the emergence of new public and private social actors, forming new power relations.

If, previously, the focus of international health strategies was the spread of infectious diseases, from the fear of the possibility of cross-border epidemics and pandemics, the global concern now is guided also by other issues that could affect global health: pollution, global climate change, bioterrorism threats, expansion of the business processes for healthcare products and services, migration of health professionals, mobility of health consumers, nutritional standards and unhealthy food, spread of tobacco, alcohol and illicit drugs. In grievances towards human health, the concern became an escalation

of noninfectious chronic-degenerative diseases, such as diabetes, cardiovascular disease and obesity, caused by important factors such as changes in eating patterns, habits and lifestyles, which often spread from rich countries to poor countries .

Apart from the possible increase of the economy, efforts in this new field of knowledge seek to make clear that climate events of great magnitude, as it recently occurred in Asia, and economic crises in the core countries economically affect the entire planet, while communicable diseases expand for long distances in a short period of time. Global health strives to demonstrate the intrinsic relationship between the environment and human health.

It is understood that the impacts of industrialization produce *externalities* that affect the entire planet. Even if they can be characterized simply as trans-boundary problems, pollution, electronic waste, contamination of drinking water and large expanses of oceans, as well as agricultural or mineral land degradation by multinational companies, reveal that there is no way to locally confine their harmful effects, given that the Earth is a closed ecological system.

While this understanding has not been fully assimilated in reality, the internationalization of risks, but also of opportunities, has led to the development and expansion of international cooperation, because many health problems require global responses to be solved. This cooperation means not only aid between countries and institutions, but working together, considering benefits and problems. Global health requires effective cooperation and, therefore, it is essential that relations between countries and institutions become more symmetrical, with shared interests among stakeholders, starting with the realities and local and national priorities

Bioethics - anticipating globalization

In the second half of the twentieth century, Potter published the important work *Bioethics: bridge to the future*, in which he discusses the need for broader care for the planet, relating living conditions not only of humans but of the entire environment. This, perhaps, was one of the first globalizing conceptions created at that time, foreshadowing a veritable avalanche of changes that would occur in the world, influencing and being influenced by the diffusion process of the foundations of globalization - that occurred from the late 1970's onwards.

Since then, both globalization and bioethics assumed other forms in relation to their countries of origin, since while being broadcast internationally they were added new contributions.

Thus, economic globalization was followed by communications, transport and technological globalization, while bioethics went from analysis and recommendations on health and life on the planet in terms of the individual to the collective, through the extent of the changes occurring in the globalized world.

Latin American countries are highlighted, where authors in the bioethics field have been discussing for more than a decade the effects of globalization, which are differentiated depending on the peoples and cultures. In this context, we discuss the issue of distributive justice for health resources as well as the need for basic sanitation supply, through the concept of protection bioethics or the resolution of persistent and emerging health and life issues of people using the equity principle according to intervention bioethics.

Bioethics has been considered a reflection that strives to encompass the human biological, social, psychological, spiritual, cultural and historical dimensions in the analysis of issues, problems and ethical dilemmas that arise in everyday life. But, also, it is seen as a socio-cultural movement of defense and protection of ethical values in the field of life and health that manifests itself through research, discourses and practices, often of a multidisciplinary nature

The basic assumption of this discussion is that life is vulnerable and that this global vulnerability is shared by all that is: everything is exposed to environmental changes, especially the poorest. Bioethics is also the transcendence of ethical responsibility, which should not be limited to the contemporary world, but spread over time to ensure the maintenance of the survival conditions of the planet for future generations only potential now . So, the question that has been posed to scholars and researchers, with increasing frequency, is: how bioethics could contribute to the discussions of topics related to global health, that face many and such diverse challenges nowadays?

Global health and bioethics - a necessary dialogue

The issues raised herein demonstrate that the great economic and technological development is not enough just in itself, it is required that their assumptions and goals are ethically discussed by all the companies in global forums and shared fairly by all. Both the international media and social networks, another phenomenon of the globalization process, have been sponsoring attitudes that reflect, primarily, a critical view of

these aspects. Particularly in health, concerns are redoubled.

From the installed economic crisis, which is the result of budgetary imbalances and lack of regulation of financial markets, social rights in general, and health in particular, have been targeted by measures to contain costs and reduce investments. If, on the one hand, the context of economic crisis represents suffering and insecurity, on the other hand, it can also be an opportune time to reassess the ethical and moral commitments, as it has often been noted throughout history. Both the process of economic globalization and development in health services, although plentiful, did not necessarily facilitate the access to goods and services produced for the entire world population.

Bioethics is concerned with the identification of ethical issues related to its various dimensions, promoting a dialogue between the principles of individual autonomy and collective solidarity. Reiterating, thus, its goal of seizing life's problems without abstracting from the deep philosophical, religious, political and legal roots, as stated by Pessini and Barchifontaine . Consistent with the commitment to discuss the ethical and moral issues facing the health and life of contemporary society and for future generations, it has not refrained from the interdisciplinary study.

Consequently, it also has deepened the studies and research in the new biotech-scientific knowledge and its application in individual and collective cost benefit, since these often have generated personal and family conflicts, besides being challenges for the management and policies of health systems. To discuss health in a globalized world can be more complex, but not necessarily more difficult, because there is greater availability of data and greater flexibility and reliability of the information, probably as a result of the globalization process.

Therefore, to diagnose problems and set priorities is easier today than in the previous world, where we barely knew the geography of the planet, causing current efforts to focus on clarification of interests and on developing sustainable agreements. In contrast, the process of globalization points to the challenges posed by cultural diversity and the difficult task of thinking about health in a world of such different mindsets, habits and customs. This is the paradox of our time: we live in a world both near and far, of almost cancelled and seemingly insurmountable borders, of excesses and infinitely indigent.

Today, when discussing transplants, implants and the genome project, which prolong life, we must also remember that there is still a need to seek solutions for malaria, dengue, yellow fever, leprosy, among others - those still reap lives early in vast parts of the world. Together with today's AIDS and urban violence, these diseases have remained epidemic for the most vulnerable and poorest peoples.

Bioethics discusses this diversity of problems from the principles of justice, equity and solidarity, requiring mutuality, given we need to have awareness of the suffering of others so that sharing resources comes to be considered as legitimate. It emphasizes the need to provide less unequal conditions of per capita income and access to basic services such as health and education, without which it is not possible to envision a more stable and fairer world.

In this time of global economic crisis, when solidarity, equity and cooperation seem to be left to a second level of interests, bioethics is a warning tool regarding the ethical imperatives that must be taken into account to reduce injustices in a globalized world, which are also incompatible with the planetary ecological balance. Therefore, bioethics can assist in the task of constructing more transparent and democratic definitions, articulations and structures patterns, promoting a responsible global community for current and future generations.

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